

*IN THE UNITED STATES PATENT AND TRADEMARK OFFICE*

Applicant: Bosch et al.

Title: STERILE FILTERED  
NANOPARTICULATE  
FORMULATIONS OF  
BUDESONIDE AND  
BECLOMETHASONE HAVING  
TYLOXAPOL AS A SURFACE  
STABILIZER

Appl. No.: Unknown

Filing Date: January 4, 2002

Examiner: Unknown

Art Unit: Unknown

**UTILITY PATENT APPLICATION**  
**TRANSMITTAL**

Commissioner for Patents  
Box PATENT APPLICATION  
Washington, D.C. 20231

Sir:

Transmitted herewith for filing under 37 C.F.R. § 1.53(b) is the nonprovisional utility patent application of:

H. William Bosch

Donna M. Marcera

Kevin D. Ostrander

Niels P. Ryde

Douglas A. White

- ☐ Applicant claims small entity status under 37 CFR 1.27.

Enclosed are:

- ☒ Specification, Claim(s), and Abstract (39 pages).
- ☐ Informal drawings ( sheets, Figures 1-).
- ☒ Unexecuted Declaration and Power of Attorney (4 pages).
- ☐ Assignment of the invention to Elan Pharma International Ltd..
- ☐ Assignment Recordation Cover Sheet.
- ☐ Small Entity statement.
- ☐ Request for application not to be published with certification under 35 USC 122(b)(2)(B)(i).
- ☐ Information Disclosure Statement.
- ☐ Form PTO-1449 with copies of \_\_\_ listed reference(s).
- ☐ Application Data Sheet (37 CFR 1.76).

The filing fee is calculated below:

	Claims as Filed		Included in Basic Fee		Extra Claims	Rate	Fee Totals
Basic Fee						\$740.00	\$740.00
Total Claims:	34	-	20	=	14	x \$18.00	= \$252.00
Independents:	4	-	3	=	1	x \$84.00	= \$84.00
If any Multiple Dependent Claim(s) present:						+ \$280.00	= \$0.00
Surcharge under 37 CFR 1.16(e) for late filing of Executed Declaration and late payment of filing fee						+ \$130.00	= \$130.00
						SUBTOTAL:	= \$1206.00
<input type="checkbox"/> Small Entity Fees Apply (subtract ½ of above):							= \$0.00
						TOTAL FILING FEE:	= \$1,206.00

- ☐ A check in the amount of \$0.00 to cover the filing fee is enclosed.
- ☒ The required filing fees are not enclosed but will be submitted in response to the Notice to File Missing Parts of Application.
- ☐ The Commissioner is hereby authorized to charge any additional fees which may be required regarding this application under 37 C.F.R. §§ 1.16-1.17, or credit any overpayment, to Deposit Account No. 19-0741. Should no proper payment be enclosed herewith, as by a check being in the wrong amount, unsigned, post-

dated, otherwise improper or informal or even entirely missing, the Commissioner is authorized to charge the unpaid amount to Deposit Account No. 19-0741.

Please direct all correspondence to the undersigned attorney or agent at the address indicated below.

Respectfully submitted,

Date Jan 4, 2002

By Michele M. Simkin

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